



PROPOSED RULE MAKING

CR-102 (June 2004)(Implements RCW 34.05.320)
Do NOT use for expedited rule making

Agency: State Board of Health

- ☒ Preproposal Statement of Inquiry was filed as WSR 04-12-119; or
☐ Expedited Rule Making--Proposed notice was filed as WSR _____; or
☐ Proposal is exempt under RCW 34.05.310(4).

- ☒ Original Notice
☐ Supplemental Notice to WSR _____
☐ Continuance of WSR _____

Title of rule and other identifying information: (Describe Subject) WAC 246-101-015, 246-101-101, 246-101-201, and 246-101-301 Notifiable Conditions. The State Board of Health (SBOH) last updated the notifiable conditions chapter in 2000 adding eight "provisionally notifiable" conditions. These eight conditions include: Autism, Birth Defects- Abdominal Wall Defects, Cerebral Palsy, Fetal Alcohol Syndrome/Fetal Alcohol Effects, Hepatitis B (chronic), Hepatitis C (acute and chronic), Herpes Simplex (initial genital infection, only), and Group A Streptococcus (invasive disease only) which are provisionally notifiable through August 2004. Provisionally notifiable conditions are conditions placed on the notifiable conditions list for 4 years in order for the Department of Health to collect sufficient data and determine if conditions should be made permanently notifiable.

Additionally, the proposed rule will require laboratories to report cases of Hepatitis B (chronic), Hepatitis C (acute and chronic), and add the national case definitions for human disease caused by insect bites Arthropod Borne virus or Arboviral Diseases. This includes viral encephalitis (inflammation of the brain) only and removes viral encephalitis from the notifiable conditions list.

Finally, the last proposed change includes an update in terminology based on recommendations from the Maternal and Child Health Section of DOH. The terms Birth Defects-Autism and Birth Defects-Fetal Alcohol Syndrome/Fetal Alcohol Effects will be updated to Birth Defects-Autism Spectrum Disorders and Birth Defects- Alcohol Related Birth Defects.

The change to a permanently notifiable status requires health care providers, health care facilities, and laboratories to report the aforementioned conditions and diagnoses to public health officials.

Hearing location(s):

Kelso Red Lion Hotel
510 Kelso Drive
Kelso, WA 98626

Submit written comments to:

Name: Jovi Swanson
Address: 101 Israel Road, Tumwater WA 98501

Website: <http://www3.doh.wa.gov/policyreview/>
fax (360)586-7424 by (date) November 1, 2004

Date: November 10, 2004 Time: 1:30 p.m.

Date of intended adoption: November 10, 2004
(Note: This is NOT the effective date)

Assistance for persons with disabilities: Contact
Jovi Swanson by November 1, 2004
TTY (800) 833-6388 or (360) 236-4028

Purpose of the proposal and its anticipated effects, including any changes in existing rules: The purpose of the proposal is to ensure continued reporting of specific conditions and diagnoses by health care providers, laboratories, and facilities to public health officials. The proposal amends WAC 246-101-015, 246-101-101, 246-101-201, and 246-101-301 by striking the provisional status for the eight provisionally notifiable conditions, making seven of the conditions permanently notifiable, moving Hepatitis B and Hepatitis C from a voluntary reporting status to a mandatory reporting status for laboratories, adding the new national case definitions endorsed by the Centers for Disease Control and Prevention Arboviral Disease and eliminating the term viral encephalitis, and updating the terminology within Birth Defects.

Reasons supporting proposal: Notifiable conditions reporting provides the information necessary for public health officials to track communicable diseases and other conditions. The data collected in notifiable conditions reporting are critical to local health departments and the Department of Health to protect the public health by tracking communicable diseases and other conditions. Public health professionals use these data to treat persons already ill, provide preventative therapies, and to assess broader patterns of disease, historical trends, and geographic clustering.

Statutory authority for adoption: RCW 43.20.050 and 70.24.125

Statute being implemented: RCW 43.20.050 and RCW 70.24.125

Is rule necessary because of a:

- Federal Law? ☐ Yes ☒ No
Federal Court Decision? ☐ Yes ☒ No
State Court Decision? ☐ Yes ☒ No
If yes, CITATION:

DATE 9/30/04

NAME (type or print)
Craig McLaughlin

SIGNATURE

TITLE
Acting Executive Director

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OCT 4 2004

TIME

WSR

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Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters:

None

Name of proponent: (person or organization) Washington State Board of Health and State Department of Health

☐ Private
☐ Public
☒ Governmental

Name of agency personnel responsible for:

| Name | Office Location | Phone |
|------------------------------------|------------------------------------|---------------|
| Drafting..... Jovi Swanson | 101 Israel Road, Tumwater WA 98501 | (360)236-4028 |
| Implementation....(See attachment) | (See attachment) | () |
| Enforcement.....(See attachment) | (See attachment) | () |

Has a small business economic impact statement been prepared under chapter 19.85 RCW?

☐ Yes. Attach copy of small business economic impact statement.

A copy of the statement may be obtained by contacting:

Name:

Address:

phone () _____

fax () _____

e-mail _____

☒ No. Explain why no statement was prepared.

Under RCW 19.85.030 an agency shall prepare a small business economic impact statement whenever a regulation imposes more than minor costs. The current proposed rule does not impose more than minor costs on small businesses.

Is a cost-benefit analysis required under RCW 34.05.328?

☒ Yes A preliminary cost-benefit analysis may be obtained by contacting:

Name: Jovi Swanson

Address: Department of Health

101 Israel Road

Town Center 1

Tumwater, WA 98501

phone (360) 236-4028

fax (360)586-7424

e-mail jovi.swanson@doh.wa.gov

☐ No: Please explain:

Implementation and Enforcement Attachment

| Name of agency personnel responsible for | Office Location | Phone |
|------------------------------------------|--------------------------------------------------------------------------|----------------|
| Implementation: | | |
| Maria Courogen | 7211 Cleanwater Lane, Bldg 14 Olympia WA 98504-7833 | (360) 236-3458 |
| Wendy Krier | 7211 Cleanwater Lane, Bldg 14 Olympia WA 98504-7833 | (360) 236-3440 |
| Mira Leslie | 1610 NE 150 th Street MSTP K-19 Shoreline WA 98155-7224 | (206) 361-2930 |
| Riley Peters | 7171 Cleanwater Lane Bldg 10 Tumwater, WA 98504-7835 | (360) 236-2323 |
| Enforcement: | | |
| Maria Courogen | 7211 Cleanwater Lane, Bldg 14 Olympia WA 98504-7833 | (360) 236-3458 |
| Wendy Krier | 7211 Cleanwater Lane, Bldg 14 Olympia WA 98504-7833 | (360) 236-3440 |
| Mira Leslie | 1610 NE 150 th Street MSTP K-19 Shoreline WA 98155-7224 | (206) 361-2930 |
| Riley Peters | 7171 Cleanwater Lane Bldg 10 Tumwater, WA 98504-7835 | (360) 236-2323 |

AMENDATORY SECTION (Amending WSR 00-23-120, filed 11/22/00, effective 12/23/00)

WAC 246-101-015 Provisional condition notification. This section describes how conditions can become notifiable; what period of time conditions are provisionally notifiable; what analyses must be accomplished during provisional notification status; the transition of provisionally notifiable conditions to permanent notification or deletion of notification requirements. The department's goal for provisionally notifiable conditions is to collect enough information to determine whether requiring notification improves public health.

(1) The state health officer may:

(a) Request reporting of cases and suspected cases of disease and conditions in addition to those required in Tables HC-1, Lab-1, and HF-1 on a provisional basis for a period of time less than forty-eight months when:

(i) The disease or condition is newly recognized or recently acknowledged as a public health concern;

(ii) Epidemiological investigation based on notification of cases may contribute to understanding of the disease or condition;

(iii) There is reason to expect that the information acquired through notification will assist the state and/or local health department to design or implement intervention strategies that will result in an improvement in public health; and

(iv) Written notification is provided to all local health officers regarding:

(A) Additional reporting requirements; and

(B) Rationale or justification for specifying the disease or condition as notifiable.

(b) Request laboratories to submit specimens indicative of infections in addition to those required in Table Lab-1 on a provisional basis for a period of time less than forty-eight months, if:

(i) The infection is of public health concern;

(ii) The department has a plan for using data gathered from the specimens; and

(iii) Written notification is provided to all local health officers and all laboratory directors explaining:

(A) Actions required; and

(B) Reason for the addition.

(2) Within forty months of the state health officer's designation of a condition as provisionally notifiable in subsection (1) of this section, or requests for laboratories to submit specimens indicative of infections in subsection (2) of this section, the department will conduct an evaluation for the notification requirement that:

(a) Estimates the societal cost resulting from the provisionally notifiable condition;

(i) Determine the prevalence of the provisional notifiable condition; and

(ii) Identify the quantifiable costs resulting from the provisionally notifiable condition; and

(iii) Discuss the qualitative costs resulting from the provisionally notifiable condition.

(b) Describes how the information was used and how it will continue to be used to design and implement intervention strategies aimed at combating the provisionally notifiable condition;

(c) Verifies the effectiveness of previous intervention strategies at reducing the incidence, morbidity, or mortality of the provisional notifiable condition;

(d) Identifies the quantitative and qualitative costs of the provisional notification requirement;

(e) Compares the costs of the provisional notification requirement with the estimated cost savings resulting from the intervention based on the information provided through the provisional notification requirement;

(f) Describes the effectiveness and utility of using the notifiable conditions process as a mechanism to collect these data; and

(g) Describes that a less burdensome data collection system (example: biennial surveys) would not provide the information needed to effectively establish and maintain the intervention strategies.

(3) Based upon the evaluation in subsection (2) of this section, the board will assess results of the evaluation after the particular condition is notifiable or the requirement for laboratories to submit specimens indicative of infections has been in place for no longer than forty months. The board will determine based upon the results of the evaluation whether the provisionally notifiable condition or the requirement for laboratories to submit specimens indicative of infections should be:

(a) Permanently notifiable in the same manner as the provisional notification requirement;

(b) Permanently notifiable in a manner that would use the evaluation results to redesign the notification requirements; or

(c) Deleted from the notifiable conditions system.

(4) ~~((The following conditions are provisionally notifiable through the date indicated:~~

~~(a) Autism (through August, 2004);~~

~~(b) Cerebral palsy (through August, 2004);~~

~~(c) Fetal alcohol syndrome/Fetal alcohol effects (through August, 2004);~~

~~(d) Hepatitis B, chronic -- Initial diagnosis, and previously unreported prevalent cases (through August, 2004);~~

~~(e) Hepatitis C -- Initial diagnosis, and previously unreported prevalent cases (through August, 2004);~~

~~(f) Herpes simplex (initial genital infection, only) (through August, 2004);~~

~~(g) Streptococcus, Group A (invasive disease only -- indicated~~

by blood, spinal fluid or other normally sterile site) (through August, 2004), and

~~(h) Birth defects - Abdominal wall defects (through August, 2004).~~

(5)) The department shall have the authority to declare an emergency and institute notification requirements under the provisions of RCW 34.05.350.

AMENDATORY SECTION (Amending WSR 00-23-120, filed 11/22/00, effective 12/23/00)

WAC 246-101-101 Notifiable conditions and the health care provider. This section describes the conditions that Washington's health care providers must notify public health authorities of on a statewide basis. The board finds that the conditions in the table below (Table HC-1) are notifiable for the prevention and control of communicable and noninfectious diseases and conditions in Washington. Principal health care providers shall notify public health authorities of these conditions as individual case reports using procedures described throughout this chapter. Other health care providers in attendance shall notify public health authorities of the following notifiable conditions, unless the condition notification has already been made. Local health officers may require additional conditions to be notifiable within the local health officer's jurisdiction.

WAC 246-101-105, 246-101-110, 246-101-115, and 246-101-120 also include requirements for how notifications shall be made, when they shall be made, the content of these notifications, and how information regarding notifiable conditions cases must be handled and may be disclosed.

Table HC-1 (Conditions Notifiable by Health Care Providers)

| Notifiable Condition | Time frame for Notification | Notifiable to Local Health Department | Notifiable to State Department of Health |
|-----------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------|------------------------------------------|
| Acquired Immunodeficiency Syndrome (AIDS) | Within 3 work days | √ | |
| Animal Bites | Immediately | √ | |
| <u>Arboviral Disease</u> | <u>Within 3 work days</u> | <u>√</u> | |
| Asthma, occupational | Monthly | | √ |
| Birth Defects - Autism (((<i>Provisional through August, 2004</i>))) <u>Spectrum Disorders</u> | Monthly | | √ |
| Birth Defects - Cerebral Palsy (((<i>Provisional through August, 2004</i>))) | Monthly | | √ |

| Notifiable Condition | Time frame for Notification | Notifiable to Local Health Department | Notifiable to State Department of Health |
|--------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------|------------------------------------------|
| Birth Defects -- ((Fetal)) Alcohol ((Syndrome/Fetal Alcohol Effects (Provisional through August, 2004))) Related Birth Defects | Monthly | | √ |
| Botulism (foodborne, infant, and wound) | Immediately | √ | |
| Brucellosis (<i>Brucella</i> species) | Immediately | √ | |
| Campylobacteriosis | Within 3 work days | √ | |
| Chancroid | Within 3 work days | √ | |
| <i>Chlamydia trachomatis</i> infection | Within 3 work days | √ | |
| Cholera | Immediately | √ | |
| Cryptosporidiosis | Within 3 work days | √ | |
| Cyclosporiasis | Within 3 work days | √ | |
| Diphtheria | Immediately | √ | |
| Disease of suspected bioterrorism origin (including): • Anthrax • Smallpox | Immediately | √ | |
| Disease of suspected foodborne origin (communicable disease clusters only) | Immediately | √ | |
| Disease of suspected waterborne origin (communicable disease clusters only) | Immediately | √ | |
| ((Encephalitis, viral | Within 3 work days | √)) | |
| Enterohemorrhagic <i>E. coli</i> (shiga-like toxin producing infections only) such as <i>E. coli</i> O157:H7 Infection. | Immediately | √ | |
| Giardiasis | Within 3 work days | √ | |
| Gonorrhea | Within 3 work days | √ | |
| Granuloma inguinale | Within 3 work days | √ | |
| <i>Haemophilus influenzae</i> (invasive disease, children under age 5) | Immediately | √ | |
| Hantavirus pulmonary syndrome | Within 3 work days | √ | |
| Hemolytic uremic syndrome | Immediately | √ | |

| Notifiable Condition | Time frame for Notification | Notifiable to Local Health Department | Notifiable to State Department of Health |
|--------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------|------------------------------------------|
| Hepatitis A (acute infection) | Immediately | √ | |
| Hepatitis B (acute infection) | Within 3 work days | √ | |
| Hepatitis B surface antigen + pregnant women | Within 3 work days | √ | |
| Hepatitis B (chronic) – Initial diagnosis, and previously unreported prevalent cases (((Provisional through August, 2004))) | Monthly | √ | |
| Hepatitis C – Acute and chronic (((Provisional through August, 2004))) | Monthly | √ | |
| Hepatitis (infectious), unspecified | Within 3 work days | √ | |
| Herpes simplex, neonatal and genital (initial infection only) (((Provisional through August, 2004))) | Within 3 work days | √ | |
| Human immunodeficiency virus (HIV) infection | Within 3 work days | √ | |
| Legionellosis | Within 3 work days | √ | |
| Leptospirosis | Within 3 work days | √ | |
| Listeriosis | Immediately | √ | |
| Lyme Disease | Within 3 work days | √ | |
| Lymphogranuloma venereum | Within 3 work days | √ | |
| Malaria | Within 3 work days | √ | |
| Measles (rubeola) | Immediately | √ | |
| Meningococcal disease | Immediately | √ | |
| Mumps | Within 3 work days | √ | |
| Paralytic shellfish poisoning | Immediately | √ | |
| Pertussis | Immediately | √ | |
| Pesticide poisoning (hospitalized, fatal, or cluster) | Immediately | | √ |
| Pesticide poisoning (all other) | Within 3 work days | | √ |
| Plague | Immediately | √ | |
| Poliomyelitis | Immediately | √ | |
| Psittacosis | Within 3 work days | √ | |
| Q Fever | Within 3 work days | √ | |

| Notifiable Condition | Time frame for Notification | Notifiable to Local Health Department | Notifiable to State Department of Health |
|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------|------------------------------------------|
| Rabies (Confirmed Human or Animal) | Immediately | √ | |
| Rabies (Including use of post-exposure prophylaxis) | Within 3 work days | √ | |
| Relapsing fever (borreliosis) | Immediately | √ | |
| Rubella (including congenital rubella syndrome) | Immediately | √ | |
| Salmonellosis | Immediately | √ | |
| Serious adverse reactions to immunizations | Within 3 work days | √ | |
| Shigellosis | Immediately | √ | |
| ((Streptococcus, Group A, Invasive (Indicated by blood, spinal fluid or other normally sterile site) (Provisional through August, 2004) | Within 3 work days | √)) | |
| Syphilis | Within 3 work days | √ | |
| Tetanus | Within 3 work days | √ | |
| Trichinosis | Within 3 work days | √ | |
| Tuberculosis | Immediately | √ | |
| Tularemia | Within 3 work days | √ | |
| Typhus | Immediately | √ | |
| Vibriosis | Within 3 work days | √ | |
| Yellow fever | Immediately | √ | |
| Yersiniosis | Within 3 work days | √ | |
| Other rare diseases of public health significance | Immediately | √ | |
| Unexplained critical illness or death | Immediately | √ | |

AMENDATORY SECTION (Amending WSR 00-23-120, filed 11/22/00, effective 12/23/00)

WAC 246-101-201 Notifiable conditions and laboratories. This section describes the conditions about which Washington's laboratories must notify public health authorities of on a statewide basis. The board finds that the conditions in the table below (Table Lab-1) are notifiable for the prevention and control of communicable and noninfectious diseases and conditions in Washington. The board also finds that submission of specimens for

many of these conditions will further prevent the spread of disease. Laboratory directors shall notify public health authorities of positive cultures and preliminary test results as individual case reports and provide specimen submissions using procedures described throughout this chapter. Local health officers may require additional conditions to be notifiable within the local health officer's jurisdiction.

WAC 246-101-205, 246-101-210, 246-101-215, 246-101-220, 246-101-225, and 246-101-230 also include requirements for how notifications and specimen submissions are made, when they are made, the content of these notifications and specimen submissions, and how information regarding notifiable conditions cases must be handled and may be disclosed.

Table Lab-1 (Conditions Notifiable by Laboratory Directors)

| Notifiable Condition | Time frame for Notification | Notifiable to Local Health Department | Notifiable to Department of Health | Specimen Submission to Department of Health (Type & Timing) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------|
| <u>Arboviral Disease (Isolation; Detection of Viral Nucleic Acid or Antibody)</u> | <u>2 days</u> | √ | | |
| Blood Lead Level | Elevated Levels – 2 Days Nonelevated Levels – Monthly | | √ | |
| Botulism (Foodborne) | Immediately | √ | | Serum and Stool - If available, submit suspect foods (2 days) |
| Botulism (Infant) | Immediately | √ | | Stool (2 days) |
| Botulism (Wound) | Immediately | √ | | Culture, Serum, Debrided tissue, or Swab sample (2 days) |
| Brucellosis (<i>Brucella</i> species) | 2 days | √ | | Subcultures (2 days) |
| CD4+ (T4) lymphocyte counts less than 200 and/or CD4+ (T4) percents less than fourteen percent of total lymphocytes (patients aged thirteen or older) | Monthly | Only when the local health department is designated by the Department of Health | √ | |
| <i>Chlamydia trachomatis</i> infection | 2 days | √ | | |
| Cholera | Immediately | √ | | Culture (2 days) |
| Cryptosporidiosis | 2 days | √ | | |
| Cyclosporiasis | 2 days | √ | | Specimen (2 days) |
| Diphtheria | 2 days | √ | | Culture (2 days) |

| Notifiable Condition | Time frame for Notification | Notifiable to Local Health Department | Notifiable to Department of Health | Specimen Submission to Department of Health (Type & Timing) |
|---------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------------|
| Disease of Suspected Bioterrorism Origin (examples): • Anthrax • Smallpox | Immediately | √ | | Culture (2 days) |
| Enterohemorrhagic <i>E. coli</i> (shiga-like toxin producing infections only) such as <i>E. coli</i> O157:H7 Infection | 2 days | √ | | Culture (2 days) |
| Gonorrhea | 2 days | √ | | |
| Hepatitis A (IgM positive) | 2 days | √ | | |
| <u>Hepatitis B (chronic) – Initial diagnosis, and previously unreported prevalent cases</u> | <u>Monthly</u> | <u>√</u> | | |
| <u>Hepatitis C – Acute and chronic</u> | <u>Monthly</u> | <u>√</u> | | |
| Human immunodeficiency virus (HIV) infection (including positive Western Blot assays, P24 antigen or viral culture tests) | 2 days | Only when the local health department is designated by the Department of Health | √ (Except King County) | |
| Human immunodeficiency virus (HIV) infection (positive results on HIV nucleic acid tests (RNA or DNA)) | Monthly | Only when the local health department is designated by the Department of Health | √ (Except King County) | |
| Listeriosis | 2 days | √ | | |
| Measles (rubeola) | Immediately | √ | | Serum (2 days) |
| Meningococcal disease | 2 days | √ | | Culture (Blood/CSF or other sterile sites) (2 days) |
| Pertussis | 2 days | √ | | |
| Plague | Immediately | √ | | Culture or other appropriate clinical material (2 days) |
| Rabies (human or animal) | Immediately | √ (Pathology Report Only) | | Tissue or other appropriate clinical material (Upon request only) |
| Salmonellosis | 2 days | √ | | Culture (2 days) |
| Shigellosis | 2 days | √ | | Culture (2 days) |
| Syphilis | | | | Serum (2 days) |
| Tuberculosis | 2 days | | √ | Culture (2 days) |

| Notifiable Condition | Time frame for Notification | Notifiable to Local Health Department | Notifiable to Department of Health | Specimen Submission to Department of Health (Type & Timing) |
|-------------------------------------------------------------|-----------------------------|---------------------------------------|------------------------------------|-------------------------------------------------------------|
| Tuberculosis (Antibiotic sensitivity for first isolates) | 2 days | | √ | |
| Tularemia | | | | Culture or other appropriate clinical material (2 days) |
| Other rare diseases of public health significance | Immediately | √ | | |

Additional notifications that are requested but not mandatory include:

(1) Laboratory directors may notify either local health departments or the department or both of other laboratory results ((including hepatitis B and hepatitis C)) through cooperative agreement.

(2) Laboratory directors may submit malaria cultures to the state public health laboratories.

AMENDATORY SECTION (Amending WSR 00-23-120, filed 11/22/00, effective 12/23/00)

WAC 246-101-301 Notifiable conditions and health care facilities. This section describes the conditions that Washington's health care facilities must notify public health authorities of on a statewide basis. The board finds that the conditions in the table below (Table HF-1) are notifiable for the prevention and control of communicable and noninfectious diseases and conditions. Local health officers may require additional conditions to be notifiable within the local health officer's jurisdiction. Health care facilities are required to notify public health authorities of cases that occur in their facilities. Health care facilities may choose to assume the notification for their health care providers for conditions designated in Table HF-1. Health care facilities may not assume the reporting requirements of laboratories that are components of the health care facility. Local health officers may require additional conditions to be notifiable within the local health officer's jurisdiction.

WAC sections 246-101-305, 246-101-310, 246-101-315, and 246-101-320 also include requirements for how notifications shall be made, when they are made, the content of these notifications, and how information regarding notifiable conditions cases must be handled and may be disclosed.

Table HF-1 (Conditions Notifiable by Health Care Facilities)

| Notifiable Condition | Time frame for Notification | Notifiable to Local Health Department | Notifiable to State Department of Health |
|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------|------------------------------------------|
| Acquired Immunodeficiency Syndrome (AIDS) | Within 3 work days | | √ |
| Animal Bites | Immediately | √ | |
| Arboviral Disease | Within 3 work days | √ | |
| Asthma, occupational | Monthly | | √ |
| Birth Defects – Abdominal Wall Defects (inclusive of gastroschisis and omphalocele) (((Provisional through August, 2004))) | Monthly | | √ |
| Birth Defects – Autism (((Provisional through August, 2004))) <u>Spectrum Disorders</u> | Monthly | | √ |
| Birth Defects – Cerebral Palsy (((Provisional through August, 2004))) | Monthly | | √ |
| Birth Defects – Down Syndrome | Monthly | | √ |
| Birth Defects – Fetal Alcohol ((Syndrome/Fetal Alcohol Effects (Provisional through August, 2004))) <u>Related Birth Defects</u> | Monthly | | √ |
| Birth Defects – Hypospadias | Monthly | | √ |
| Birth Defects – Limb reductions | Monthly | | √ |
| Birth Defects – Neural Tube Defects (inclusive of anencephaly and spina bifida) | Monthly | | √ |
| Birth Defects – Oral Clefts (inclusive of cleft lip with/without cleft palate) | Monthly | | √ |
| Botulism (foodborne, infant, and wound) | Immediately | √ | |
| Brucellosis (<i>Brucella</i> species) | Immediately | √ | |
| Cancer (See chapter 246-430 WAC) | Monthly | | √ |
| Chancroid | Within 3 work days | √ | |
| <i>Chlamydia trachomatis</i> infection | Within 3 work days | √ | |

| Notifiable Condition | Time frame for Notification | Notifiable to Local Health Department | Notifiable to State Department of Health |
|--------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------|------------------------------------------|
| Cholera | Immediately | ✓ | |
| Cryptosporidiosis | Within 3 work days | ✓ | |
| Cyclosporiasis | Within 3 work days | ✓ | |
| Diphtheria | Immediately | ✓ | |
| Disease of suspected bioterrorism origin (including): • Anthrax • Smallpox | Immediately | ✓ | |
| Disease of suspected foodborne origin (communicable disease clusters only) | Immediately | ✓ | |
| Disease of suspected waterborne origin (communicable disease clusters only) | Immediately | ✓ | |
| ((Encephalitis, viral | Within 3 work days | ✓)) | |
| Enterohemorrhagic <i>E. coli</i> (shiga-like toxin producing infections only) such as <i>E. coli</i> O157:H7 Infection | Immediately | ✓ | |
| Giardiasis | Within 3 work days | ✓ | |
| Gonorrhea | Within 3 work days | ✓ | |
| Granuloma inguinale | Within 3 work days | ✓ | |
| Gunshot wounds (nonfatal) | Monthly | | ✓ |
| <i>Haemophilus influenzae</i> (invasive disease, children under age 5) | Immediately | ✓ | |
| Hantavirus pulmonary syndrome | Within 3 work days | ✓ | |
| Hemolytic uremic syndrome | Immediately | ✓ | |
| Hepatitis A (acute infection) | Immediately | ✓ | |
| Hepatitis B (acute infection) | Within 3 work days | ✓ | |
| Hepatitis B surface antigen+ pregnant women | Within 3 work days | ✓ | |
| Hepatitis B (chronic) – Initial diagnosis, and previously unreported prevalent cases (((Provisional through August, 2004))) | Monthly | ✓ | |

| Notifiable Condition | Time frame for Notification | Notifiable to Local Health Department | Notifiable to State Department of Health |
|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------|------------------------------------------|
| Hepatitis C – Acute and chronic (<i>(((Provisional through August, 2004)))</i>) | Monthly | √ | |
| Hepatitis (infectious), unspecified | Within 3 work days | √ | |
| Human immunodeficiency virus (HIV) infection | Within 3 work days | √ | |
| Legionellosis | Within 3 work days | √ | |
| Leptospirosis | Within 3 work days | √ | |
| Listeriosis | Immediately | √ | |
| Lyme Disease | Within 3 work days | √ | |
| Lymphogranuloma venereum | Within 3 work days | √ | |
| Malaria | Within 3 work days | √ | |
| Measles (rubeola) | Immediately | √ | |
| Meningococcal disease | Immediately | √ | |
| Mumps | Within 3 work days | √ | |
| Paralytic shellfish poisoning | Immediately | √ | |
| Pertussis | Immediately | √ | |
| Pesticide poisoning (hospitalized, fatal, or cluster) | Immediately | | √ |
| Plague | Immediately | √ | |
| Poliomyelitis | Immediately | √ | |
| Psittacosis | Within 3 work days | √ | |
| Q Fever | Within 3 work days | √ | |
| Rabies (Confirmed Human or Animal) | Immediately | √ | |
| Rabies (Use of post-exposure prophylaxis) | Within 3 work days | √ | |
| Relapsing fever (borreliosis) | Immediately | √ | |
| Rubella (including congenital rubella syndrome) | Immediately | √ | |
| Salmonellosis | Immediately | √ | |
| Serious adverse reactions to immunizations | Within 3 work days | √ | |
| Shigellosis | Immediately | √ | |
| <i>(((Streptococcus, Group A Invasive (Indicated by blood, spinal fluid or other normally sterile site) (Provisional through August, 2004)</i> | Within 3 work days | √)) | |
| Syphilis | Within 3 work days | √ | |

| Notifiable Condition | Time frame for Notification | Notifiable to Local Health Department | Notifiable to State Department of Health |
|---------------------------------------------------|-----------------------------|---------------------------------------|------------------------------------------|
| Tetanus | Within 3 work days | ✓ | |
| Trichinosis | Within 3 work days | ✓ | |
| Tuberculosis | Immediately | ✓ | |
| Tularemia | Within 3 work days | ✓ | |
| Typhus | Immediately | ✓ | |
| Vibriosis | Within 3 work days | ✓ | |
| Yellow fever | Immediately | ✓ | |
| Yersiniosis | Within 3 work days | ✓ | |
| Other rare diseases of public health significance | Immediately | ✓ | |
| Unexplained critical illness or death | Immediately | ✓ | |